

VISN: 7

Facility Name: Augusta VA Medical Center (509)

Affected Facilities: Augusta VA Medical Center (509)

A. Summary and Conclusions

a. **Executive Summary:**

This suggested change in the footprint of Augusta VA Medical Center's Uptown Division (UD) adds Building 84 and 95 to the list of structures to be demolished. This list included Buildings 18, 19, 20, 7, 76, the living quarters (29, 30, 31, 32, 33) and the garages (40, 65, 66). Acreage (approximately 10.6 acres) associated with Buildings 18, 19, 20 and the living quarters would be available for enhanced use or out lease. The plan also recognizes that two Primary Care teams have relocated from the Downtown Division (DD) to 17,481 department gross square feet (DGSF) of converted vacant space within building 110, main hospital at the UD effective October 1, 2003. The remaining two Primary Care teams will relocate to converted, space at the Uptown Division in April 2004. The movement of Primary Care to UD will eliminate the need to have a 120-car parking facility built at DD at a cost of \$2,205,000. The vacant Primary Care 25,920 DGSF at the DD would be made available to accommodate planned growth in Specialty Care outpatient workload. This plan also shows occupation of a portion of Unit 3F (UD) by Dwight David Eisenhower Army Medical Center for housing of active duty substance abuse program participants that was not reflected in the original Draft CARES Market Plan.

b. **Current environment:** Describe the facility location and neighborhood and condition of the existing buildings.

The Downtown Division consists of the primary hospital building (801), the energy plant, a temporary trailer for Health Information employees, and the employee and patient parking lots. Acute medical and surgical services (both inpatient and outpatient) are provided at this site. It also holds a 60-bed Spinal Cord Injury Unit. It is located in a commercial area of the City of Augusta. The facility sits on a site that is approximately 20 acres and is bordered on the south and west by another large medical complex, the Medical College of Georgia (MCG). It is bordered on the north and east by several restaurants, a bank, a very busy street, a pharmacy, and several other retail establishments. The geography of the downtown site is such that little if any expansion, other than vertical, is possible. The building was opened in 1980 and is in excellent condition. It has had recent renovations including modernizing its outpatient clinic space, and expanding the Spinal Cord Injury Unit.

The Uptown Division is located in a residential area of the City of Augusta and is approximately 3 miles from the Downtown Division. Healthcare activities are concentrated in Building 110, which was opened in 1991. Building 110 houses Mental Health, Extended Care, and Rehabilitation programs. It also houses a 15-bed Blind Rehabilitation Center. There are a number of vacant buildings on the site, including Buildings 18, 19, 20, 7, 76, 84 and the living quarters, including garages. Building 95, laundry facility is currently in operation but the long-range plan is to outsource laundry services due to the age and replacement cost of the facility and equipment. The back of the campus contains a walking course, a driver's education course, and other recreational facilities. The campus is approximately 105 acres in size. St. Joseph Hospital and several medical complexes are located approximately one-half mile east. In addition, Augusta State University is one-half mile to the north. A major strip shopping center, banks, office buildings, restaurants and a community airport is located approximately $\frac{3}{4}$ mile west. The size and geography of the UD property lends itself to further development, however, there are 40-45 acres that is required as part of retention pond for area and is unable to be used for development on the southeast corner of the property.

c. **Proposed Realignment:**

- **Provision of Care:** This is a footprint reduction plan for the two-division Augusta VAMC. Alternative #1 adds Buildings 84 and 95 at Uptown Division (UD) to the list of structures to be demolished for a total of 253,690 square feet, an *increase of 48,690 permanently managed space over the original market plan*. The plan documents that two Primary Care Teams have relocated from Downtown Division (DD) to converted vacant space (17,481) at the UD, helping to *reduce the reserve vacant by 31,582*. The remaining two PC teams will relocate to the Uptown Division April 2004. The vacant space (26,286) remaining at DD will be made available for expected growth in specialty care outpatient workload. A portion (16,519) of unit 3F (UD) is occupied by Eisenhower Army Medical Center for housing their substance abuse patients. VISN 7 business functions occupy 36,971 in bldg 110 UT. *The total out leased space has increased by 44,998 from the original market plan*. Please refer to the table on Step 1a in the attached spreadsheet for a complete listing of the affected buildings and actions.

- **Additional Space Constructed:** The original market plan proposed 43,000 new square feet of construction for the SCI bed expansion. That number is *reduced by 15,000 in this alternative* to 28,000 due to the bed projection revision from 26 additional beds to 20 additional beds.

- **Travel Time Impact:** Essentially none, since the divisions are only three miles apart. Both sites are served by public transportation. Uptown Division is more easily accessed from the interstate than Downtown Division.

- **Impact on Quality:** This alternative will reduce infrastructure operating costs and allow more appropriated funds to support direct patient care activities.

- **Impact on the Community:** The enhancement of Uptown Division through the demolition of the unsightly vacant buildings and *enhanced use of the*

10.6 acres will add jobs and services to the community and enhance the campus appearance.

- **Impact on Human Resources:** There should be no impact on personnel as a result of this footprint change other than some staff moving from Downtown to Uptown. No workload is being reassigned to another VA facility.

- **Patient care issues and specialized programs:** As a highly affiliated VA Medical Center, Augusta VA Medical Center provides all tertiary care (with the exception of organ transplants), primary care, mental health, rehabilitation, and extended care services. In addition, Augusta VA Medical Center operates a 60-bed Spinal Cord Injury Unit that provides both acute and rehabilitative services. The Spinal Cord Injury Unit is located at the DD and the plan will add 20 additional beds at that location. Augusta VA Medical Center also operates a 15-bed Blind Rehabilitation Center, which is located at the Uptown Division. All of these programs will continue to be maintained. The footprint change would have no impact on any of Augusta's current health care services.

- **Impact on Research and Academic Affairs:** There will be no impact on current research programs. Research and animal laboratory space will continue to be maintained at DD. There would be some impact on the training of General Medicine residents from the Medical College of Georgia (MCG). House Staff currently rotates through Primary Care Team D. When Primary Care Team D relocates to UD in April 2004, the House Staff will have to make arrangements to also relocate to UD. VA is currently working with MCG resident program officials to minimize any concerns that may arise as result of this move. Again, the two divisions are only three miles apart, and no significant problems are foreseen with the relocation of this particular Primary Care team.

- **Cost Effectiveness of Alternative:** The NPV for this alternative is \$22,638,606 higher than the original market plan. Construction costs are \$1,916,837 lower and this savings would pay for UD building demolition costs of \$1,770,854. With the move of Primary Care to UD, pressure for parking at DD is minimized. A 120-car parking facility at \$2,205,000 is avoided. Additional annual revenue of \$157,293 is generated from enhanced use and DoD sharing at UD.

B. Analysis:

- **Current physical condition of the realignment site and patient safety:**

2001 Baseline Data	VISN 7 Augusta							
Facility Name	Campus Acreage	Original Bed Capacity (Beds)	Number of Vacant Bldgs	Number of Occupied Bldgs	Vacant Space (SF)	Average Condition Score	Annual Capital Costs *	Valuation of Campus (AEW)
Augusta UT	106	653	8	15	187,016	3.78	\$ 9,386,453	\$2,143,000,000
Augusta DT	19.9	420	0	3	12,889	3.78		\$161,100,000

The primary buildings at the Downtown Division include Building 801, the main hospital tower, and Building 802, the energy plant. Both were opened in 1980 and are in good to excellent condition (note Average Condition Score of 3.78 in

table above indicates better than average condition with 5 being the maximum). The main hospital was designed so that its original bed capacity was 420 beds. Both the site and buildings were constructed in a way that promotes patient safety. The main hospital has undergone recent renovations that provided an automatic fire sprinkler system throughout the building and upgraded the fire alarm system. New signage is currently being installed throughout the facility, including the grounds, to enhance easier recognition of directions and safety instructions.

There are 23 buildings at UD, and they were constructed in various times from 1913 to 1991. The main hospital building, Building 110, was opened in 1991 and is in excellent condition. It was originally designed to house 653 beds. Building 110, as well as Buildings 35 (Greenhouse), 82 (Dietetics Facility), and 112 (Outdoor Public Restrooms) were designed; built and maintained in a way that promotes patient safety. Building 110 is currently undergoing a project to upgrade the fire alarm system. A signage project, identical to that on ongoing at DD, will be initiated in FY 2004 to further enhance patient safety. Most of the other buildings are in fair to poor condition and are currently vacant. These include Buildings 18, 19, 20, 7, 76, 84 and the living quarters and garages. Building 95, the laundry, is currently in use but the long-range plan calls for contracting out these services and discontinuing use of the building. The building has been added to the demolition list in Alternative #1 in a later year.

- **Workload Summary: No Change**
- **Travel Times: No change**
- **Capital:**

Capital Cost Summary

Status Quo (Plus capital)	Original Market Plan	Alt 1
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Facility Being Studied

New Construction

Renovation

TOTAL

Augusta		
0	3,773,039	1,856,202
0	2,034,189	4,289,749
0	5,807,228	6,145,951

Alternative #1 places greater emphasis on use of existing space through renovation. Thus the renovation costs are \$2,255,560 higher than the original market plan but the total capital cost is only \$338,723 higher than the original market plan.

- **Capital Assets Management:** This is a footprint reduction plan for the two-division Augusta VAMC. Alternative #1 adds Buildings 84 and 95 at Uptown Division (UD) to the list of structures to be demolished for a total of 253,690 square feet, an increase 48,690 permanently managed space over the original market plan. The total out leased space has increased by 44,998 from the original market plan due to the identification of out leased space that was not included in the original market plan. New construction is reduced by 15,000 square feet in Alternative #1. Please see the table below

Name of Facility Being Studied: Augusta

	Existing Space FY 2001	Vacant space eliminated in Step 1	SF remaining after Step 1	Required SF based on peak workload 2008 at facility	SF still Needed	New Construction SF	New Lease SF	Total New SF	Renovation of Existing SF	Conversion of Vacant SF
Orig MP	1,301,351	205,492	1,095,859	1,089,927	(5,932)	43000	0	43000	0	53970
Identify any capital needs ID'ed in the market plan that are no longer needed:						-15000				
Alt # 1	1,301,351	253,690	1,047,661	1,089,600	41,939	28000	0	28000		58767
Description of Capital: (list SF, Category and Brief Justification										
New Construction:			20 Bed SCI Addition, Design in FY05, Phase 1 Construction (12,000 SF) in FY06, Phase 2 Construction (16,000) SF in FY12.							
Renovation of Existing			24,056 SF of SCIU, Building 801 to be renovated in FY04 as part of Project 509-318, Spinal Cord Injury Unit (SCIU)							
Renovation of Existing			25,920 SF of Primary Care space, Building 801 to be changed to Specialty Care outpatient space.							
Conversion of Vacant			17,481 SF of vacant NHCU, Bldg. 110 converted in FY03 to accommodate two primary Care teams being relocated from Bldg 801.							

- **Impact considerations:** N/A
- **Reuse of the Realigned Campus:**

The cost to demolish Buildings 18, 19, 20, 84, 95 and the living quarters/garages is **\$1,770,854.** in Alternative #1. The 10.6 acres on the north (left side on map below) boundary of the facility are proposed for enhanced use development once the vacant buildings are removed. The best and highest use would be commercial development and would make the property worth approximately \$1 million dollars based on local real estate market estimates. The enhanced use annual lease value is estimated at \$67,293. The expansive parking lot at Uptown Division will better serve the high volume primary care clinic patients with easy access to parking. This will reduce the need for a \$2,205,000 parking structure at Downtown Division and will allow for the projected specialty care clinic growth in the former primary care space.

Summarize alternative analysis:

Augusta VA Medical Center – Preferred Alternative Analysis (see table below)

Preferred Alternative Description and Rationale: The preferred alternative reduces the footprint of UD of the Augusta VA Medical Center by adding buildings 84 and 95 to the list of structures to be demolished that were submitted in the original market plan. The alternative also makes available 10.6 acres associated with Buildings 18, 19, 20 and the living quarters for enhanced use or out lease. The alternative recognizes that two Primary Care teams have already relocated from DD into converted vacant space at UD space within building 110, main hospital at the UD effective October 1, 2003. The remaining two Primary Care teams will relocate from DD to UD in April 2004. The movement of Primary Care to UD will eliminate the need to have a 120-car parking facility built at DD at a cost of \$2,205,000. The vacant space remaining at DD will be made available for planned growth in Specialty Care outpatient workload. This alternative also notes current out lease of a portion of Unit 3F (UD) to Eisenhower Army Medical Center for treatment of active duty substance abuse program participants.

	NAME OF FACILITY BEING STUDIED: Augusta		
Preferred alternative description and rationale:	The preferred alternative reduces the footprint of Uptown Division (UD) of Augusta VA Medical Center (VAMC) by adding buildings 84 and 95 to the list of structures to be demolished as submitted in the original market plan. The alternative also makes available 10.6 acres associated with buildings 18, 19 and 20 and the living quarters for enhanced use or out lease. The alternative recognizes that two Primary Care teams have relocated from Downtown Division (DD) into converted vacant space at UD. The remaining two Primary Care teams will relocate from DD to UD in April 2004. The movement of Primary Care to UD will eliminate the need for a 120-car parking facility built at DD at a cost \$2,205,000. The vacant space remaining at DD will be made available for planned growth in Specialty Care outpatient workload. A portion of Unit 3F at UD is out leased to Eisenhower Army Medical Center for treatment of active duty substance abuse program participants.		
	Status Quo	Original Market Plan	Alternate # 1
Short Description:	There is no change in footprint or availability of services at either the Downtown or Uptown Divisions. Primary Care would still be provided at DD. Unoccupied buildings at UD would continue to require attention to insure the safety of the structures.	One Primary Care team would relocate from DD to UD. Buildings planned for demolition included Buildings 18, 19, 20, 7, 76 and the living quarters including garages.	This alternative adds buildings 84 and 95 to the list of buildings at UD planned for demolition. All Primary Care teams are relocated from DD to UD. The NPV for this alternative is \$22,638,606 higher than the original market plan.
Total Construction Costs	\$ 9,386,000	\$ 3,773,039	\$ 1,856,202
Life Cycle Costs	\$ 3,208,651,489	\$ 2,993,399,104	\$ 2,963,971,932
New LCC (if any)		\$ 3,033,857,081	\$ 3,009,208,813
Impact on Access	Familiarity with both campuses by enrolled veterans is maintained. Access is not altered in any fashion.	With movement of Primary Care team to UD, access to Specialty Care outpatient care and inpatient care is maintained at DD. Movement of one team would allow for planned growth in Primary Care and Specialty Care outpatient workload.	Movement of all Primary Care teams to UD allows better access to both Primary Care and Specialty Care. More parking is available at UD for Primary Care patients and there is more room for expansion as necessary. With movement of Primary Care to UD, pressure for parking at DD is minimized. A 120-car parking facility at \$2,205,000 is avoided. It also makes more space available at DD for planned increase in Specialty Care outpatient workload.

Impact on Quality	Current excellent quality of care and services provided is maintained.	Relocation of one Primary Care team to the Uptown Division along with opening of CBOCs in Athens, GA and Aiken, SC, enables the Georgia market to meet both access and capacity guidelines. Allowing better access to Specialty Care services enhances quality of care.	Increasing access to care at both Downtown and Uptown Divisions would enhance quality of care. Reduced capital and operating costs can be transferred to patient care.
Impact on Staffing & Community	No impact on staffing	No impact on current Augusta VAMC employees other than one primary care team to UD. Each community that opens a new CBOC will benefit from the positive financial impact on the local healthcare providers.	Some Augusta VAMC employees will have to relocate to UD. Others will pick up additional assignments as a result of the move. Demolition of vacant buildings will have positive financial impact.
Impact on Research and Education	No impact on research programs or our primary academic affiliate.	Minimal impact on our primary academic affiliate and no impact on research space or programs located at DD.	House staff assigned to Primary Care Team D would relocate to UD. No impact on research programs or space located at DD.
Optimizing Use of Resources	Maximizes use of available space.	Opening of CBOCs could possibly allow one contractor to provide all additional primary care in the community. Movement of one Primary Care team to UD and opening of CBOCs allows Augusta VAMC to handle the projected increases in Primary Care and Specialty Care outpatient services at the parent facility. Demolition of vacant buildings conserves additional maintenance and energy resources.	Moving all of Primary Care outpatient services to UD allows rapid expansion of space for Specialty Care outpatient services. Primary Care teams will be able to absorb majority of Mental Health and Extended Care outpatient workload to assure continuity of care. Additional buildings added to demolition list further reduces need to utilize scarce maintenance and energy resources. Enhanced use and DoD sharing of space create \$157,293 in revenue.
Support other Missions of VA	No impact on other missions of VA	No impact on other missions of VA	VA/DoD sharing of vacant NHCU space for Substance Abuse Treatment for US Army generates \$90,000 per year and creates greater privacy for soldiers.
Other significant considerations	None	None	None